

Label

(See page 17.)

**Use the
IRS label.**Otherwise,
please print
or type.**Presidential****Election Campaign**

Your first name and initial

Last name

OMB No. 1545-0074

Your social security number

If a joint return, spouse's first name and initial

Last name

Spouse's social security number

Home address (number and street). If you have a P.O. box, see page 17.

Apt. no.

▲ Make sure the SSN(s) above
and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, see page 17.

Checking a box below will not
change your tax or refund.

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 17)

☐ **You**☐ **Spouse****Filing
status**Check only
one box.**1** ☐ **Single****2** ☐ **Married filing jointly** (even if only one had income)**3** ☐ **Married filing separately**. Enter spouse's SSN above and
full name here. ▶**4** ☐ **Head of household** (with qualifying person). (See page 18.)
If the qualifying person is a child but not your dependent,
enter this child's name here. ▶**5** ☐ **Qualifying widow(er) with dependent child** (see page 19)**Exemptions****6a** ☐ **Yourself**. If someone can claim you as a dependent, **do not check**
box 6a.**b** ☐ **Spouse****c Dependents:****(1) First name**

Last name

(2) Dependent's social

security number

(3) Dependent's

relationship to you

(4) ☒ if qualifying
child for child
tax credit (see
page 20)**Boxes
checked on
6a and 6b****No. of children
on 6c who:**• **lived with
you**
• **did not live
with you due
to divorce or
separation**
(see page 21)**Dependents
on 6c not
entered above****Add numbers
on lines
above ▶****d Total number of exemptions claimed.**If more than six
dependents,
see page 20.**Income****Attach
Form(s) W-2
here. Also
attach
Form(s)
1099-R if tax
was withheld.**If you did not
get a W-2, see
page 24.Enclose, but do
not attach, any
payment. Also,
please use **Form
1040-V**.**7 Wages, salaries, tips, etc. Attach Form(s) W-2.****7****8a Taxable interest.** Attach Schedule B if required.**8a****b Tax-exempt interest. Do not include on line 8a.****8b****9a Ordinary dividends.** Attach Schedule B if required.**9a****b Qualified dividends** (see page 25).**9b****10 Capital gain distributions** (see page 25).**10****11a IRA**

distributions.

11a**11b Taxable amount**
(see page 25).**11b****12a Pensions and**

annuities.

12a**12b Taxable amount**
(see page 26).**12b****13 Unemployment compensation and Alaska Permanent Fund dividends**
(see page 28).**13****14a Social security**
benefits.**14a****14b Taxable amount**
(see page 28).**14b****15 Add lines 7 through 14b (far right column). This is your total income. ▶****15****Adjusted
gross
income****16 RESERVED****16****17 IRA deduction** (see page 30).**17****18 Student loan interest deduction** (see page 32).**18****19 RESERVED****19****20 Add lines 16 through 19. These are your total adjustments.****20****21 Subtract line 20 from line 15. This is your adjusted gross income. ▶****21**

Tax, credits, and payments

22	Enter the amount from line 21 (adjusted gross income).	22	
23a	Check <input type="checkbox"/> You were born before January 2, 1946, <input type="checkbox"/> Blind if: <input type="checkbox"/> Spouse was born before January 2, 1946, <input type="checkbox"/> Blind } Total boxes checked 23a <input type="checkbox"/>		
b	If you are married filing separately and your spouse itemizes deductions, see page 34 and check here 23b <input type="checkbox"/>		
24	Enter your standard deduction (see page 34).	24	
25	Subtract line 24 from line 22. If line 24 is more than line 22, enter -0-.	25	
26	Exemptions. Multiply \$3,650 by the number on line 6d.	26	
27	Subtract line 26 from line 25. If line 26 is more than line 25, enter -0-. This is your taxable income .	27	
28	Tax , including any alternative minimum tax (see page 35).	28	
29	Credit for child and dependent care expenses. Attach Form 2441.	29	
30	Credit for the elderly or the disabled. Attach Schedule R.	30	
31	Education credits from Form 8863, line 23.	31	
32	Retirement savings contributions credit. Attach Form 8880.	32	
33	Child tax credit (see page 38).	33	
34	Add lines 29 through 33. These are your total credits .	34	
35	Subtract line 34 from line 28. If line 34 is more than line 28, enter -0-.	35	
36	Advance earned income credit payments from Form(s) W-2, box 9.	36	
37	Add lines 35 and 36. This is your total tax .	37	
38	Federal income tax withheld from Forms W-2 and 1099.	38	
39	2010 estimated tax payments and amount applied from 2009 return.	39	
40	Making work pay credit. Attach Schedule M.	40	
41a	Earned income credit (EIC).	41a	
b	Nontaxable combat pay election.	41b	
42	Additional child tax credit. Attach Form 8812.	42	
43	American opportunity credit from Form 8863, line 14.	43	
44	Add lines 38, 39, 40, 41a, 42, and 43. These are your total payments .	44	

If you have a qualifying child, attach Schedule EIC.

Refund

Direct deposit? See page 64 and fill in 46b, 46c, and 46d or Form 8888.

45	If line 44 is more than line 37, subtract line 37 from line 44. This is the amount you overpaid .	45	
46a	Amount of line 45 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	46a	
b	Routing number <input type="text"/>	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number <input type="text"/>		
47	Amount of line 45 you want applied to your 2011 estimated tax .	47	
48	Amount you owe. Subtract line 44 from line 37. For details on how to pay, see page 66.	48	
49	Estimated tax penalty (see page 66).	49	

Third party designee

Do you want to allow another person to discuss this return with the IRS (see page 67)? ☐ **Yes.** Complete the following. ☐ **No**

Designee's name <input type="text"/>	Phone no. <input type="text"/>	Personal identification number (PIN) <input type="text"/>
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Sign here

Joint return? See page 17. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Your signature <input type="text"/>	Date <input type="text"/>	Your occupation <input type="text"/>	Daytime phone number <input type="text"/>
Spouse's signature. If a joint return, both must sign. <input type="text"/>	Date <input type="text"/>	Spouse's occupation <input type="text"/>	<input type="text"/>

Paid preparer's use only

Preparer's signature <input type="text"/>	Date <input type="text"/>	Check if self-employed <input type="checkbox"/>	PTIN <input type="text"/>
Firm's name (or yours if self-employed), address, and ZIP code <input type="text"/>	EIN <input type="text"/>	Phone no. <input type="text"/>	